



August 2018

Sub-sectors

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**Environmental Health**

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Environmental Health
<b>Indicator:</b> Number of people receiving improved service quality from solid waste management, drainage, or vector control activities (without double-counting)	
<b>INDICATOR DESCRIPTION</b>	
<p><b>DEFINITION(S)</b></p> <p>People: Individuals whose living environment has been improved through solid waste management, drainage, or vector control activities will typically include the entire catchment population within close vicinity of the activity performed. The quality of “service” they receive is further “improved” as a result of USAID/OFDA assistance in terms of its ease of accessibility, reliability, and/or affordability. Include a description of how the “catchment” population was determined for these activities.</p> <p>Solid waste management: The process of handling and disposal of waste material which can pose public health risks and have negative impact on the environment if not attended to appropriately.</p> <p>Drainage: The means of removing surplus surface water in or near settlements.</p> <p>Vector control: A variety of initiatives used to limit or eradicate disease-carrying agents (e.g., insects, other arthropods, rodents).</p>	
<b>Numerator:</b> N/A	
<b>Denominator:</b> N/A	
<b>Unit of Measure:</b> Number of individuals. Each individual should only be counted once,	

regardless of the number of activities to which they are a beneficiary.

**Disaggregated by:** Sex

**Suggested Data Collection Method:** Two separate measurements are required for this indicator:

1. A documented measurement of the improvement to the living environment; and
2. The population of the area who benefit from the activity must be calculated. A variety of methods used to estimate the population receiving benefits from the program are acceptable. Examples include
  - A full-counting of beneficiaries,
  - Official camp/shelter population data,
  - Conducting a household survey to determine number of people per household and then multiply by the number of households benefiting,
  - A key informant interview with community leader or local authority who has recently conducted population survey, and
  - Recent census data from national records.

Detail what sources were used to determine the number of beneficiaries and/or the number of beneficiary households.

**Suggested Data Source**

1. Documentation of the change or improvement in the living environment should be conducted as a primary data collection activity, with photographs or written documentation of the change.
2. Population data sources used will depend upon the setting and what current data is available. The sources used may include primary data and/or secondary data. Census data is likely the most accurate if it is recent and if there has not been a large population displacement since the census. If census data is old or no longer relevant, you may consider conducting primary data collection utilizing secondary data collected from the community/camp leader or local authority (if the community/camp leader or local authority has conducted a recent population survey), or through primary data collection. Detail what sources or processes were utilized to estimate the beneficiary population.
3. Where possible, conduct a direct count of beneficiary households and estimates of the number of people living in those households.
4. Where possible, household surveys of a representative and statistically significant sample of those who received improved service quality to verify the activity. This data source requires that a baseline must be established before the start of activity implementation through an initial household survey conducted by your organization or a third party evaluator using a representative and statistically significant sample of households in the zone of influence.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Environmental Health
<b>Indicator:</b> <b>EH1 (Community Cleanup):</b> Average number of community cleanup/debris removal activities conducted per community targeted by the environmental health program	
<b>INDICATOR DESCRIPTION</b>	
<p><b>DEFINITION(S)</b></p> <p>This indicator measures the number of activities conducted at community level to remove accumulated solid waste and other debris that, if left unattended, can pose public health risks to the affected population and may have a negative impact on the environment. This indicator does not apply to rubble removal which falls under USAID/OFDA's Shelter and Settlements sector.</p> <p>This indicator is intended to measure the removal of solid waste or debris that accumulated due to a shock to a community (e.g., a natural disaster) or a disruption in normal solid waste collection systems for reasons that were beyond the local government's control (e.g., mass displacement). USAID/OFDA does not support routine cleanup activities unless there is a clear and immediate public health risk (e.g. leishmaniasis) or if the activity is occurring in an internally displaced persons (IDP) camp, other than in exceptional circumstances such as in a conflict or post-conflict setting where public rubbish collection has ceased completely.</p> <p>For this indicator, a community is generally defined as a group of households:</p> <ol style="list-style-type: none"> <li>1. Having a defined geographic area;</li> <li>2. Linked by social, economic, and/or cultural ties; and</li> <li>3. Sharing a common leadership or governmental structure.</li> </ol> <p>These are typically at the lower end of the governmental/administrative spectrum (e.g., towns, villages, hamlets, neighborhoods). An IDP camp (or its sub-divisions in the case of large camps) is considered a community. As "community" is highly contextual, you should adapt this definition to your setting and be consistent in its application.</p> <p>An <i>activity</i> is defined as an organized effort in a defined location intended to for a specific purpose with a specified duration of time. Example: A two-week campaign in <i>Community X</i> to clean public drainage channels that were blocked by soil/debris/waste from a recent flood. Types of cleanup/debris removal activities include</p> <ul style="list-style-type: none"> <li>• Removal of waste/debris resulting from a natural disaster (e.g., flood, hurricane, typhoon);</li> <li>• Removal of waste/debris accumulated during conflict;</li> <li>• Removal of solid waste/soil blocking public drainage channels;</li> <li>• Removal of solid waste that has accumulated in public areas; and</li> <li>• Other cleanup activities that will have a demonstrable and immediate positive public health effect on the community.</li> </ul>	

<b>Numerator:</b> Total number of community cleanup/debris removal activities conducted in all communities which were targeted for such activities.
<b>Denominator:</b> Total number of communities targeted by the environmental health program for cleanup/debris removal activities.
<b>Unit of Measure:</b> Number of community cleanup/debris removal activities conducted for numerator. Number of communities for denominator. Both numerator and denominator are reported as well as the average.
<b>Disaggregated by:</b> N/A
<b>Suggested Data Collection Method:</b> Enumeration of the number of cleanup/debris removal activities conducted during the project period. Enumeration of the total number of communities targeted for cleanup/debris removal activities during the project period.
<b>Suggested Data Source:</b> Project records

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Environmental Health
<b>Indicator:</b> <b>EH2 (Solid Waste Management - Communal):</b> Average number of communal solid waste disposal sites created and in use per community targeted by the environmental health program	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> <p>This indicator measures the availability and functionality of disposal sites created for the final disposition of solid waste generated within a community.</p> <p>For this indicator, a community is generally defined as a group of households:</p> <ol style="list-style-type: none"> <li>1. Having a defined geographic area;</li> <li>2. Linked by social, economic, and/or cultural ties; and</li> <li>3. Sharing a common leadership or governmental structure.</li> </ol> <p>These are typically at the lower end of the governmental/administrative spectrum (e.g., towns, villages, hamlets, neighborhoods). An IDP camp (or its sub-divisions in the case of large camps) is considered a community. As “community” is highly contextual, you should adapt this definition to your setting and be consistent in its application.</p> <p>For the purpose of this indicator, <i>created</i> includes the development of new solid waste disposal sites as well as the reactivation of former solid waste disposal sites that have fallen into complete disuse. Creation of a solid waste disposal site means that, at a minimum, the site is</p> <ol style="list-style-type: none"> <li>1. Accessible to users;</li> </ol>	

2. Fenced with a controlled entry/exit;
3. Of a reasonable volume based on the size of its user population;
4. Designed and operated in a manner that minimizes vector issues;
5. Designed and operated in a manner that mitigates potential negative environmental impacts; and
6. Accompanied by a written operations and maintenance (O&M) plan to include collection and transport to the site.

Determination of whether the site is “in use” will be based on

1. The presence of improperly disposed solid waste within the supported community;
2. Clear signs of use while observing the site (e.g. real time usage, proper maintenance, controlled operation, worn paths); and
3. A structured interview with the caretaker or a focus group discussion (FGD) with beneficiaries.

**Numerator:**

Total number of communal solid waste disposal sites created and in use in all communities which were targeted for this activity.

**Denominator:**

Total number of communities targeted by the environmental health program for creation of communal solid waste disposal sites.

**Unit of Measure:**

Number of solid waste disposal sites for numerator. Number of communities for denominator. Both numerator and denominator are reported as well as the average.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** Data collection for the numerator will include

1. A field observation at each disposal site;
2. A community crosswalk to assess the presence of improperly disposed solid waste;
3. A visual inspection of the site’s written O&M plan; and
4. Either an interview with the caretaker or a FGD with the beneficiaries.

The denominator will be enumerated from project records.

**Suggested Data Source:** For the numerator, records from field assessments completed at each solid waste disposal site initiated by the program. Project records for the denominator.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Environmental Health
<b>Indicator:</b>	

**EH3 (Solid Waste Management - Household):** Percent of households targeted by the WASH program that are properly disposing of solid waste

### INDICATOR DESCRIPTION

#### DEFINITION(S)

This indicator measures the presence of proper solid waste disposal practices at household level.

A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. You should adapt this household definition to your context to ensure consistency among enumerators.

Proper disposal of solid waste means that households

1. Have access to appropriate hardware for disposal of solid waste; and
2. Demonstrate appropriate usage of this hardware.

While “appropriate” hardware is contextual, it generally includes any household or communal refuse bin or pit which, when used properly, adequately reduces public health risks associated with vectors, flooding, and contamination of water sources.

Appropriate usage means that

1. There is no unhealthy accumulation of solid waste in the living area; and
2. The hardware is operated and maintained as designed (e.g., bins have lids, waste in pits is regularly covered with soil or ash, no obvious vector issues).

Living Area definition: In cases where different households are living collectively (e.g., an IDP camp, collective shelters, public buildings, transit centers), the living area is defined as inside the wall/fence that surrounds the collective area. If there is no wall/fence, then the living area is defined as the collective area plus a 20-meter radius around the group of houses, shelters, or structures that make up the collective area. In cases where households are living separately, the living area is defined as being inside the wall/fence that surrounds the household’s house, shelter, or structures (i.e., its compound). If there is no wall/fence, then the living area is defined as being within a 20-meter radius around the house, shelter or group of structures that make up the household.

**Numerator:** Number of households who properly dispose of solid waste.

**Denominator:** Total number of households surveyed in the target population.

**Unit of Measure:** Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

#### Suggested Data Collection Method:

The presence of proper household solid waste disposal practices is measured by interview and direct observation during a quantitative, representative, population-based (household) survey.

To determine if the household's solid waste disposal practice complies with the definition stated above, enumerators will

1. Ask the respondent where his/her household disposes its solid waste;
2. Observe the stated disposal site and determine whether it is "appropriate" and properly operated and maintained; and
3. Assess the living area for unhealthy accumulations of solid waste.

**Suggested Data Source:** Records from statistically valid household surveys

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Environmental Health
<b>Indicator:</b> <b>EH4 (Drainage - Standing Water):</b> Average number of persistent standing water sites eliminated via drainage interventions per community targeted by the environmental health program	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> <p>This indicator measures the number of drainage activities aimed at eliminated persistent standing water sites, which, if left unattended, could have negative public health and environmental impacts.</p> <p>For this indicator, a community is generally defined as a group of households:</p> <ol style="list-style-type: none"> <li>1. Having a defined geographic area;</li> <li>2. Linked by social, economic, and/or cultural ties; and</li> <li>3. Sharing a common leadership or governmental structure.</li> </ol> <p>These are typically at the lower end of the governmental/administrative spectrum (e.g., towns, villages, hamlets, neighborhoods). An IDP camp (or its sub-divisions in the case of large camps) is considered a community. As "community" is highly contextual, you should adapt this definition to your setting and be consistent in its application.</p> <p>A persistent standing water site is defined as one in which standing water remains over such a prolonged period of time that it causes potentially negative public health or environmental impacts.</p> <p>Eliminated means that standing water is not present when inspecting the site no earlier than three months after activity completion, and that, as a result of the drainage measures undertaken, standing water is not expected to reappear in the foreseeable future.</p> <p>Appropriate drainage interventions include</p> <ul style="list-style-type: none"> <li>• Soakaway pits/trenches for sullage;</li> <li>• Constructing new stormwater drainage channels;</li> </ul>	

<ul style="list-style-type: none"> <li>• Rehabilitating existing drainage channels (e.g., clearing constrictions, expanding the network);</li> <li>• Constructing/repairing diversion channels around key infrastructure; and</li> <li>• Other measures that remove standing water and prevent future ponding of sillage, surface runoff, and stormwater.</li> </ul>
<b>Numerator:</b> Total number of persistent standing water sites eliminated via drainage interventions in all communities which were targeted for this activity.
<b>Denominator:</b> Total number of communities targeted by the environmental health program for drainage interventions aimed at eliminating persistent standing water sites.
<b>Unit of Measure:</b> Number of persistent stand water sites eliminated for numerator. Number of communities for denominator. Both numerator and denominator are reported as well as the average.
<b>Disaggregated by:</b> N/A
<b>Suggested Data Collection Method:</b> Enumeration of the number of persistent standing water sites eliminated via drainage interventions during the project period. Enumeration of the total number of communities targeted for drainage interventions aimed at eliminating persistent standing water sites during the project period.
<b>Suggested Data Source:</b> Project records

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Environmental Health
<b>Indicator:</b> <b>EH5 (Vector Control):</b> Average number of vector control activities conducted per community targeted by the environmental health program	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> This indicator measures the number of activities conducted for the sole purpose of controlling disease-causing vectors.  As noted beneath, for the purpose of this indicator, vector control activities include environmental modification, chemical and biological control, and personal protective measures. While other WASH efforts such as latrine promotion, solid waste management, drainage and hygiene promotion also contribute to a reduction in vector populations, they should not be counted within this indicator as they are captured in other indicators and are not generally done for the “sole” purpose of reducing disease vectors.	



For the purpose of this indicator, the promotion of long-lasting insecticide-treated nets (LLINs) is not to be counted as a vector control activity even though it is a viable personal protective measure. As LLIN's are a restricted item for USAID/OFDA, LLIN's fall under the Pest and Pesticides sub-sector of the Agriculture and Food Security Sector for procurement and the Health sector for activity implementation.

For this indicator, a community is generally defined as a group of households:

1. Having a defined geographic area;
2. Linked by social, economic, and/or cultural ties; and
3. Sharing a common leadership or governmental structure.

These are typically at the lower end of the governmental/administrative spectrum (e.g., towns, villages, hamlets, neighborhoods). An IDP camp (or its sub-divisions in the case of large camps) is considered a community. As "community" is highly contextual, you should adapt this definition to your setting and be consistent in its application.

An *activity* is defined as an organized effort in a defined location intended to for a specific purpose with a specified duration of time (e.g. a two-week indoor residual spraying campaign in an IDP camp to reduce the population of adult *Anopheles* mosquitoes). For this indicator, appropriate vector control activities include

1. Environmental modification (e.g., levelling land, filling borrow pits, removing unwanted vegetation around canals/ponds);
2. Chemical control methods (e.g., indoor residual spraying, application of larvicides or molluscicides);
3. Biological control methods (e.g., larvivorous fish); and
4. Promotion of personal protective measures (e.g., eliminating breeding sites in and around the living area, avoiding areas where and times when vectors are known to persist, rat-proofing houses).

**Numerator:** Total number of vector control activities conducted in all communities which were targeted for this activity.

**Denominator:** Total number of communities targeted by the environmental health program for vector control activities.

**Unit of Measure:** Number of vector control activities conducted for numerator. Number of communities for denominator. Both numerator and denominator are reported as well as the average.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** Enumeration of the number of vector control activities conducted during the project period. Enumeration of the total number of communities targeted for vector control activities during the project period.

**Suggested Data Source:** Project records

## Hygiene Promotion

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Hygiene Promotion
<b>Indicator:</b> Number of people receiving direct hygiene promotion (excluding mass media campaigns and without double-counting)	
<b>INDICATOR DESCRIPTION</b>	
<p><b>DEFINITION(S)</b>            People: Direct recipients of hygiene promotion who have received hygiene messaging personally through a household visit or through participating in a group session implemented with USAID/OFDA funding. People who participated in group sessions and also received household visits should not be counted twice. People who received multiple household visits should also only be counted once. People who did not receive hygiene messages directly from an agent of the project should not be counted at all.</p> <p>Receiving NFIs does not count as hygiene promotion. Beneficiaries of hygiene promotion have received messaging or behavior change communication as a means of improving personal or family hygiene behaviors.</p>	
<b>Numerator:</b> N/A	
<b>Denominator:</b> N/A	
<b>Unit of Measure:</b> Number of individuals	
<b>Disaggregated by:</b> Sex	
<b>Suggested Data Collection Method:</b> Records of households visited and records of participants at group hygiene sessions	
<b>Suggested Data Source:</b> Primary data collected through registration and records of participants directly receiving messages through hygiene promotion programs	

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Hygiene Promotion
<p><b>Indicator:</b>  <b>HP1 (Hand Washing Knowledge):</b> Percent of people targeted by the hygiene promotion program who know at least three (3) of the five (5) critical times to wash hands</p>	

INDICATOR DESCRIPTION
<p><b>DEFINITION(S)</b></p> <p>This indicator measures individuals' knowledge of the hand washing practices which are most effective at preventing the spread of pathogens along the fecal-oral cycle. The five critical times to wash hands are defined as</p> <ol style="list-style-type: none"> <li>1. After defecation/using the toilet;</li> <li>2. Before eating;</li> <li>3. After changing diapers or cleaning a child's bottom;</li> <li>4. Before preparing food; and</li> <li>5. Before feeding an infant.</li> </ol>
<p><b>Numerator:</b> Number of survey respondents who demonstrate that they know at least three (3) of the (5) critical times to wash hands.</p>
<p><b>Denominator:</b> Total number of people surveyed in the target population.</p>
<p><b>Unit of Measure:</b> Number of people for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.</p>
<p><b>Disaggregated by:</b> Sex</p>
<p><b>Suggested Data Collection Method:</b> Knowledge of the critical times to wash hands is measured through a quantitative, representative, population-based (household) survey. Questions exploring handwashing knowledge must be open-ended, e.g., "Please state for me all of the occasions when it is most important to wash one's hands."</p>
<p><b>Suggested Data Source:</b> Records from statistically valid household surveys are preferred. Other reliable population-based survey methods (e.g., people at water points) may be used when household surveys are not possible.</p>

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Hygiene Promotion
<p><b>Indicator:</b></p> <p><b>HP2 (Hand Washing Capacity):</b> Percent of households targeted by the hygiene promotion program with soap and water at a designated household handwashing location</p>	
INDICATOR DESCRIPTION	
<p><b>DEFINITION(S)</b></p> <p>This indicator measures the presence of key hand washing hardware at household level which can enable better hand washing behaviors.</p> <p>A household is generally defined as one or more people living in shared space (a</p>	

physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. You should adapt this household definition to your context to ensure consistency among enumerators.

The designated household hand washing location must be a place that makes handwashing convenient during the critical times (at a minimum, within the household compound or near the household latrine). This indicator captures handwashing stations only at the household level. Communal handwashing stations (e.g., at communal latrines in a camp setting) are excluded. Even in settings where households use communal latrines, households must still have their own handwashing station to promote handwashing at other critical times (e.g., before eating, before food preparation).

Both soap and water for handwashing must be present at the designated location.

**Numerator:** Number of households with both soap and water at a designated hand washing location.

**Denominator:** Total number of households surveyed in the target population.

**Unit of Measure:** Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** The presence of both soap and water at a designated household hand washing location is measured by direct observation during a quantitative, representative, population-based (household) survey.

**Suggested Data Source:** Records from statistically valid household surveys

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Hygiene Promotion
<b>Indicator:</b> <b>HP3 (Safe Water Handling):</b> Percent of households targeted by the hygiene promotion program who store their drinking water safely in clean containers	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> This indicator measures the existence of safe household water storage practices that reduce the risks of post-collection water contamination.  A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water,	

hygiene/sanitation facilities, or food preparation areas. You should adapt this household definition to your context to ensure consistency among enumerators.

This indicator requires that water be stored in safe containers and that those containers be clean. A safe water storage container is defined as a drinking water storage vessel which limits the risk of contamination and prevents dipping instruments or hands from coming in contact with the water (e.g. sealed/covered buckets with spigots or narrow-necked jerry cans). The determination of whether a container is clean is based on the presence/absence of dirt, grime, sediment, or other foreign substances on the interior or exterior surfaces of the container.

**Numerator:** Number of households who store their drinking water safely in clean containers.

**Denominator:** Total number of households surveyed in the target population.

**Unit of Measure:** Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** The existence of safe water storage practices is measured by direct observation during a quantitative, representative, population-based (household) survey. Using the indicator definition, direct observation will determine whether the container is both (a) safe – meaning it is of a type that limits the risk of further contamination (e.g., sealed/covered container with a spigot or narrow-necked jerry can); and (b) clean.

**Suggested Data Source:** Records from statistically valid household surveys

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Hygiene Promotion
<b>Indicator:</b> <b>HP4 (Excreta Disposal – Open Defecation):</b> Percent of households targeted by the hygiene promotion program with no evidence of feces in the living area	
INDICATOR DESCRIPTION	
<b>DEFINITION(S)</b> This indicator measures the effectiveness of hygiene promotion efforts to reduce the practice of open defecation in immediate living areas.  A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. You should adapt this household	

definition to your context to ensure consistency among enumerators.

For this indicator, feces includes both human and animal feces.

**Living Area definition:** In cases where different households are living collectively (e.g., an IDP camp, collective shelters, public buildings, transit centers), the living area is defined as inside the wall/fence that surrounds the collective area. If there is no wall/fence, then the living area is defined as the collective area plus a 20-meter radius around the group of houses, shelters, or structures that make up the collective area. In cases where households are living separately, the living area is defined as being inside the wall/fence that surrounds the household's house, shelter, or structures (i.e., its compound). If there is no wall/fence, then the living area is defined as being within a 20-meter radius around the house, shelter or group of structures that make up the household.

**Numerator:** Number of households with no evidence of feces in the living area

**Denominator:** Total number of households surveyed in the target population

**Unit of Measure:** Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** The presence of feces in the living area is measured by direct observation during a quantitative, representative, population-based (household) survey.

**Suggested Data Source:** Records from statistically valid household surveys

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Hygiene Promotion
<b>Indicator:</b> <b>HP5 (Excreta Disposal – Latrine Usage):</b> Percent of people targeted by the hygiene promotion program who report using a latrine the last time they defecated	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> This indicator measures the effectiveness of hygiene promotion efforts to encourage people to use latrines when defecating. Use of this indicator generally assumes that household or communal latrines are accessible to the population.  For this indicator, a latrine is defined as <ul style="list-style-type: none"><li>• A simple pit latrine;</li></ul>	

<ul style="list-style-type: none"> <li>• A VIP latrine; or</li> <li>• A flush latrine (pour-flush or cistern-flush) connected to a pit, septic, or sewer.</li> </ul>
<b>Numerator:</b> Number of survey respondents who state that they used a latrine the last time they defecated.
<b>Denominator:</b> Total number of people surveyed in the target population.
<b>Unit of Measure:</b> Number of people for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.
<b>Disaggregated by:</b> Sex
<b>Suggested Data Collection Method:</b> The practice of using a latrine the last time defecating is measured through interviews during a quantitative, representative, population-based (household) survey. Questions exploring whether a person used a latrine the last time they defecated must be open ended, e.g., “The last time you defecated, where did you do so?”
<b>Suggested Data Source:</b> Records from statistically valid household surveys are preferred. Other reliable population-based survey methods (e.g., people at water points) may be used when household surveys are not possible.

## Sanitation

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> Number of people directly utilizing improved sanitation services provided with USAID/OFDA funding	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> People: Individuals counted as benefiting from a sanitation program are those who are targeted by the program and who regularly utilize sanitation constructed, rehabilitated, or maintained either directly by the project, or constructed by beneficiaries themselves as a result of program activities to create a communal demand for sanitation.	
<b>Numerator:</b> N/A	
<b>Denominator:</b> N/A	
<b>Unit of Measure:</b> Number of individuals	

**Disaggregated by:** Sex

**Suggested Data Collection Method:** Two measurements are required for this indicator:

1. Utilization of sanitation facilities should be documented either through an observed decrease in open defecation, observed usage of latrines, or household survey data of self-reported behaviors.
2. The population benefiting from the sanitation program must be estimated. A variety of methods are acceptable to estimate the number of individuals served by the sanitation program. A full counting of direct beneficiaries, where possible, is likely the most accurate means. This may not be possible in all cases. If a full counting is not possible, a household (HH) survey may be necessary in order to calculate average HH size. This can then be multiplied by the number of HHs served to obtain an estimate of the number of beneficiaries. The official camp/shelter population data may also be used. Alternatively, a key informant interview with a community leader or local authority who has recently conducted population survey, or data from a recent census from national records may be used, either to calculate average HH size and/or the number of HHs served. Detail what sources or processes were used to estimate the number of beneficiaries and/or the number of households.

**Suggested Data Source(s):**

1. Household surveys to determine utilization or direct observation of either usage of latrines or a reduction in open defecation.
2. Population data sources utilized will depend upon the setting and what current data is available. It will also depend upon whether or not household (HH) latrines or communal latrines were constructed. If HH latrines were constructed, then either official population data or a representative average HH size must be determined in order to estimate the number of individual beneficiaries. If communal latrines are constructed, all of the HHs who have regular access to the latrines must somehow be determined. Data sources may be either primary data or secondary data, depending upon what data exists and what data is needed to create a realistic estimate of the population served. Detail what sources or processes were used to determine the number of beneficiaries.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> <b>S1 (Excreta Disposal – Safe Excreta Practice):</b> Proportion of men, women, boys and girls who last defecated in a toilet (or whose feces was last disposed of in a safe	



manner)
<b>INDICATOR DESCRIPTION</b>
<p><b>DEFINITION(S)</b></p> <p>This is an IASC (Inter-Agency Standing Committee) indicator that measures the self-reported practice of safe excreta disposal. Use of this indicator should be accompanied by indicator HP4 (which measures the prevalence of feces in the environment) as a cross-checking method.</p> <p>This indicator does not need to be disaggregated by men, women, boys and girls. Rather, the term “men, women, boys and girls” for this indicator refers to the aggregated total population (all ages, all genders).</p> <p>For this indicator, an appropriate toilet includes</p> <ul style="list-style-type: none"> <li>• A simple pit latrine;</li> <li>• A ventilated improved pit (VIP) latrine;</li> <li>• A flush latrine (pour-flush or cistern-flush) connected to a pit, septic, or sewer; and</li> <li>• A chemical toilet.</li> </ul> <p>Other safe disposal practices include</p> <ul style="list-style-type: none"> <li>• Cathole method;</li> <li>• A defecation field or trench which is managed in a way that prevents excreta from being a source of contamination;</li> <li>• Use of a potty for children/infants whereby excreta are then disposed of in a toilet or cathole; and</li> <li>• Placing disposable diapers in a solid waste collection system that keeps the diapers out of the environment and prevents them from being a source of contamination.</li> </ul>
<p><b>Numerator:</b> Number of survey respondents who state that they used a toilet the last time they defecated (or whose feces was last disposed of in a safe manner).</p>
<p><b>Denominator:</b> Total number of men, women, boys and girls surveyed in the target population.</p>
<p><b>Unit of Measure:</b> Number of people for both numerator and denominator. Both numerator and denominator are reported as well as the proportion.</p>
<p><b>Disaggregated by:</b> N/A</p>
<p><b>Suggested Data Collection Method:</b> The practice of using a toilet (or other safe manner of excreta disposal) the last time defecating is measured through interviews during a quantitative, representative, population-based (household) survey. Questions must be open ended, e.g., “The last time you defecated, where did you do so?”</p>
<p><b>Suggested Data Source:</b> Records from statistically valid household surveys are preferred. Other reliable population-based survey methods (e.g., people at water points) may be used when household surveys are not possible.</p>

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> <b>S2 (Excreta Disposal – Household Latrine Infrastructure):</b> Percent of households targeted by latrine construction/promotion program whose latrines are completed and clean	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> <p>This indicator measures the program’s effectiveness in facilitating the construction of household latrines in order to prevent human excreta from being a source of contamination. Facilitation can range from direct construction by your organization (100% subsidy) to promotion of household latrines with no subsidy.</p> <p>A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. You should adapt this household definition to your context to ensure consistency among enumerators.</p> <p>A latrine is defined as</p> <ul style="list-style-type: none"> <li>• A simple pit latrine;</li> <li>• A ventilated improved pit (VIP) latrine; or</li> <li>• A flush latrine (pour-flush or cistern-flush) connected to a pit, septic, or sewer.</li> </ul> <p>A “completed” latrine means that it is designed, located, built and maintained in a way that</p> <ol style="list-style-type: none"> <li>1. Enables safe and convenient access to all users, and</li> <li>2. Safely contains excreta so that it is not a source of contamination.</li> </ol> <p>For this indicator, clean is defined as</p> <ol style="list-style-type: none"> <li>1. the absence of feces or used anal cleansing material on the slab and within a five-meter radius around the exterior of the latrine; and</li> <li>2. The absence of unreasonably noxious odors and excess flies which may cause users to avoid the latrine.</li> </ol>	
<b>Numerator:</b> Number of households targeted by the latrine construction/promotion program whose latrines are completed and clean.	
<b>Denominator:</b> Total number of households targeted by the latrine construction/promotion program.	
<b>Unit of Measure:</b> Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.	
<b>Disaggregated by:</b> N/A	

**Suggested Data Collection Method:** The enumeration of households whose latrines are completed and clean (the numerator) is measured by direct observation during a census of all households targeted by the program. The denominator will be enumerated from project records.

In situations where a full enumeration (i.e., a census) is not practical (e.g., due to the scale of the program), this indicator will be measured through a quantitative, representative, population-based (household) survey. In this case, the numerator will be the number of surveyed households whose latrines are completed and clean. The denominator will be the total number of households surveyed in the target population.

**Suggested Data Source:** If a census of targeted households is conducted, the data source for the numerator will be observation records from household visits. For the denominator, the data source will simply be an enumeration of the targeted households.

If a representative, household survey is conducted, then the data source will be records from statistically valid household surveys.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> <b>S3 (Excreta Disposal – Crude Latrine Coverage):</b> Average number of users per functioning toilet	
INDICATOR DESCRIPTION	
<b>DEFINITION(S)</b> This is an IASC (Inter-Agency Standing Committee) indicator that provides a crude estimate of toilet coverage (number of people/functioning toilet) based on the estimated population size and the number of functioning toilets. This is useful as a guide primarily in the early stages of an emergency response to assess the extent to which people have access to toilets. For the purpose of this indicator, a toilet and a latrine are synonymous.	
A toilet is defined as <ul style="list-style-type: none"> <li>• A simple pit latrine;</li> <li>• A ventilated improved pit (VIP) latrine;</li> <li>• A flush latrine (pour-flush or cistern-flush) connected to a pit, septic, or sewer;</li> <li>• or a chemical toilet.</li> </ul> A “functioning” toilet is defined as one which is designed, located, built and maintained in a way that <ol style="list-style-type: none"> <li>1. Enables safe and convenient access to all users; and</li> <li>2. safely contains excreta so that it is not a source of contamination.</li> </ol>	

<b>Numerator:</b> Estimated or enumerated population size
<b>Denominator:</b> Estimated or enumerated number of functioning toilets
<b>Unit of Measure:</b> Number of people for numerator. Number of functioning toilets for denominator. Both numerator and denominator are reported as well as the average.
<b>Disaggregated by:</b> N/A
<p><b>Suggested Data Collection Method:</b> While a census of the population and an enumeration of the number of functioning toilets is the most accurate data collection method, it is unlikely this will be practical during the early stages of the response.</p> <p>If census data is not available and a conducting a new census is impractical, the numerator and denominator must be estimated. A representative, population-based survey would be the preferred estimation method. For example, a representative household (HH) survey could reasonably estimate the average HH size and the percentage of HHs with a functioning toilet. The population could then be estimated by multiplying the average HH size by the estimated number of HHs. If using systematic random sampling, one benefit is that the survey will yield the estimated total number of HHs. The total number functioning toilets could be estimated by adding the number derived from the HH survey (i.e., the percentage of HHs with a functioning toilet multiplied by the total number of HHs) plus the total number of functioning public toilets (enumerated or estimated).</p> <p>Alternately, if the area is too large to conduct a full HH survey but has a fairly homogenous population density, an estimate can be conducted from defined segments of the area and then extrapolated. This involves</p> <ol style="list-style-type: none"> <li>1. Drawing a map of the area to be assessed (easily done with a GPS unit);</li> <li>2. Estimating the area;</li> <li>3. Superimposing a grid over the map and numbering each grid;</li> <li>4. Going to randomly selecting grids and conducting a HH survey in a one-hectare square (100m x 100m) to estimate the number of HHs, average HH size, and number of functioning latrines;</li> <li>5. Repeating step 4 until at least 1% of the area has been assessed; and</li> <li>6. Extrapolating this data to the entire area.</li> </ol> <p>The numerator and denominator can also be estimated either from secondary data or through key informant interviews (KIIs). The accuracy of data from either of these sources may be poor unless the data is based on a recent census or population-based assessment by a third party.</p>
<p><b>Suggested Data Source:</b> In order of preference and accuracy, USAID/OFDA prefers records from</p> <ul style="list-style-type: none"> <li>• A census;</li> <li>• A statistically valid population-based survey;</li> <li>• Secondary data; or</li> <li>• KIIs.</li> </ul> <p>Describe what sources or methods were used to estimate both the numerator and the</p>

denominator and the rationale for selecting the source or method.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b>  <b>S4 (Handwashing Facilities):</b> Percent of latrines/defecation sites in the target population with handwashing facilities that are functional and in use	
INDICATOR DESCRIPTION	
<p><b>DEFINITION(S)</b></p> <p>This indicator measures the prevalence of handwashing facilities at latrines and defecation sites. The indicator will be disaggregated by household latrines/defecation sites and public latrines/defecations sites.</p> <p>For this indicator, a latrine is defined as</p> <ul style="list-style-type: none"> <li>• A simple pit latrine;</li> <li>• A ventilated improved pit (VIP) latrine;</li> <li>• A flush latrine (pour-flush or cistern-flush) connected to a pit, septic, or sewer;</li> <li>• or a chemical toilet.</li> </ul> <p>The latrine must be designed, located, built and maintained in a way that</p> <ol style="list-style-type: none"> <li>1. Enables safe and convenient access to all users; and</li> <li>2. Safely contains excreta so that it is not a source of contamination.</li> </ol> <p>A defecation site is defined as a specific location (other than a latrine) where defecation practices and excreta are managed in a way that isolates excreta and prevents it from being a source of contamination. Defecation sites include</p> <ul style="list-style-type: none"> <li>• Clearly demarcated areas where individuals defecate in catholes (generally at the very early stage of an emergency);</li> <li>• Defecation fields; and</li> <li>• Defecation trenches.</li> </ul> <p>A functional handwashing facility is one which</p> <ol style="list-style-type: none"> <li>1. Is located no more than 10 meters from the latrine or defecation site;</li> <li>2. Has both soap and water present; and</li> <li>3. Appropriately manages gray water.</li> </ol> <p>Determination of whether the handwashing facility is “in use” will be based on clear signs of recent usage while observing the site. Signs of recent use includes individuals actually washing hands during observation, evidence of proper maintenance, worn paths, wet soap, signs of rinse water on the ground.</p>	

<b>Numerator:</b> Number of latrines/defecation sites with handwashing facilities that are functional and in use.
<b>Denominator:</b> Total number of latrines/defecation sites surveyed in the target population.
<b>Unit of Measure:</b> Number for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.
<b>Disaggregated by</b> Type <ul style="list-style-type: none"> <li>• Household</li> <li>• Public</li> </ul>
<p><b>Suggested Data Collection Method:</b> For household latrines, this indicator should be measured by direct observation during a quantitative, representative, population-based (household) survey. If the household latrine complies with the definition above, the enumerator should observe the latrine to assess whether it has a handwashing facility that is functional and in use.</p> <p>For public latrines and defecation sites, this indicator should be measured by a census. Each public latrine and defecation site (as defined above) should be observed in order to assess whether it has a handwashing facility that is functional and in use.</p>
<b>Suggested Data Source:</b> For handwashing facilities at household latrines, records from statistically valid household surveys. For handwashing facilities at public latrines/defecation sites, records from a census of all public latrines.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> <b>S5 (Bathing Facilities – Crude Coverage):</b> Number of people per safe bathing facility completed in the target population	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> This indicator provides a crude estimate of access to safe bathing facilities based on the estimated population size and the number of safe bathing facilities. This is useful as a guide primarily in emergency settings.  A safe bathing facility at household level is one whose access is limited solely to household members while also being conveniently accessible to each household member (adults, children, male, female, disabled). A safe communal bathing facility or a household facility shared with other community members must be:	

1. Gender separated,
2. Lockable from the inside,
3. Well-lit or ensure users have access to torches, and
4. Conveniently accessible to all members of the community.

**Numerator:** Estimated or enumerated population size

**Denominator:** Estimated or enumerated number of safe bathing facilities

**Unit of Measure:** Number of people for numerator. Number of safe bathing facilities for denominator. Both numerator and denominator are reported as well as the ratio.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** While a census of the population and an enumeration of the number of safe bathing facilities is the most accurate data collection method, it is unlikely this will be practical during the early stages of the response.

If census data is not available and a conducting a new census is impractical, the numerator and denominator must be estimated. A representative, population-based survey would be the preferred estimation method. For example, a representative household (HH) survey could reasonably estimate the average HH size and the percentage of HHs with a safe bathing facility. The population could then be estimated by multiplying the average HH size by the estimated number of HHs. If using systematic random sampling, one benefit is that the survey will yield the estimated total number of HHs. The total number of safe bathing facilities could be estimated by adding the number derived from the HH survey (i.e., the percentage of HHs with a safe bathing facility multiplied by the total number of HHs) plus the total number of public safe bathing facilities (enumerated or estimated).

Alternately, if the area is too large to conduct a full HH survey but has a fairly homogenous population density, an estimate can be conducted from defined segments of the area and then extrapolated. This involves

1. drawing a map of the area to be assessed (easily done with a GPS unit);
2. Estimating the area;
3. Superimposing a grid over the map and numbering each grid;
4. Going to randomly selecting grids and conducting a HH survey in a one hectare square (100m x 100m) to estimate the number of HHs, average HH size, and number of safe bathing facilities;
5. Repeating step 4 until at least 1% of the area has been assessed; and
6. Extrapolating this data to the entire area.

The numerator and denominator can also be estimated either from secondary data or through key informant interviews (KIIs). The accuracy of data from either of these sources may be poor unless the data is based on a recent census or population-based assessment by a third party.

**Suggested Data Source:** In order of preference and accuracy, USAID/OFDA prefers records from

- A census;

- A statistically valid population-based survey;
- Secondary data; or
- KIs.

Describe what sources or methods were used to estimate both the numerator and the denominator and the rationale for selecting the source or method.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> <b>S6 (Excreta Disposal in Health Facilities):</b> Percent of excreta disposal facilities built or rehabilitated in health facilities that are clean and functional	
INDICATOR DESCRIPTION	
<b>DEFINITION(S)</b> This indicator measures the cleanliness and operational status of all excreta disposal facilities built or rehabilitated by the program in targeted health facilities.  For this indicator, an excreta disposal facility is defined as <ul style="list-style-type: none"> <li>• A simple pit latrine;</li> <li>• A VIP latrine; or</li> <li>• A flush latrine (pour-flush or cistern-flush) connected to a pit, septic, or sewer.</li> </ul> Clean is defined as <ul style="list-style-type: none"> <li>• The absence of feces or used anal cleansing material on the slab and within a five-meter radius around the exterior of the excreta disposal facility; and</li> <li>• The absence of unreasonably noxious odors and excess flies which may cause users to avoid the facility.</li> </ul> A “functional” excreta disposal facility at a health facility must <ol style="list-style-type: none"> <li>1. Be constructed of cleanable material;</li> <li>2. Be supplied with water if water is required for flushing or anal cleansing;</li> <li>3. Be lockable from the inside; and</li> <li>4. Have a handwashing station with soap and water located no more than ten meters away.</li> </ol>	
<b>Numerator:</b> Number of clean and functional excreta disposal facilities	
<b>Denominator:</b> Total number of excreta disposal facilities built or rehabilitated	
<b>Unit of Measure:</b> Number of excreta disposal facilities for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.	
<b>Disaggregated by:</b> N/A	



**Suggested Data Collection Method:** The functionality of all (100%) excreta disposal facilities built or rehabilitated by the program in health facilities should be assessed by direct observation during a cross-sectional survey no earlier than three months after building or rehabilitating.

**Suggested Data Source:** For the numerator, records from an assessment of all excreta disposal facilities during a health facility survey. For the denominator, project records.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> <b>S7 (Hand Washing Stations in Health Facilities):</b> Percent of hand washing stations built or rehabilitated in health facilities that are functional	
<b>INDICATOR DESCRIPTION</b>	
<b>DEFINITION(S)</b> This indicator measures the operational status of all hand washing stations built or rehabilitated by the program in targeted health facilities. Handwashing facilities are generally associated with either a latrine or common area accessible to staff, patients, and caregivers.  A “functional” handwashing station associated with a latrine must <ol style="list-style-type: none"> <li>1. Be located no more than 10 meters from the latrine;</li> <li>2. Have both soap and water present; and</li> <li>3. Appropriately manage gray water.</li> </ol> A “functional” handwashing station associated with other common areas accessible to staff, patients, and caregivers must <ol style="list-style-type: none"> <li>1. Be in a location which makes hand washing convenient to patients, caregivers, and staff;</li> <li>2. Have both soap and water present; and</li> <li>3. Appropriately manage gray water.</li> </ol>	
<b>Numerator:</b> Number of functional hand washing stations.	
<b>Denominator:</b> Total number of hand washing stations built or rehabilitated.	
<b>Unit of Measure:</b> Number of hand washing stations for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.	
<b>Disaggregated by:</b> N/A	
<b>Suggested Data Collection Method:</b> The functionality of all (100%) hand washing	

stations built or rehabilitated by the program in health facilities should be assessed by direct observation during a cross-sectional survey no earlier than three months after building or rehabilitating.

**Suggested Data Source:** For the numerator, records from an assessment of all handwashing stations during a health facility survey. For the denominator, project records.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Sanitation
<b>Indicator:</b> <b>S8 (Menstrual Hygiene Management (MHM) Facilities):</b> Percent of MHM facilities constructed in target population that are currently in use	
INDICATOR DESCRIPTION	
<p><b>DEFINITION(S)</b></p> <p>This indicator measures how acceptable and accessible communal menstrual hygiene management (MHM) (i.e., female friendly) facilities constructed by the program are to the women and girls intended to use them. A key goal of these facilities is to improve the safety, privacy, and dignity with which women and girls can live in emergency contexts. In most contexts, rather than requiring added infrastructure, this simply requires modest improvements to commonly provided WASH infrastructure.</p> <p>Communal MHM facilities may be constructed at public and institutional levels. They may be constructed in combination with latrines and bathing facilities. As well, stand-alone laundering facilities such as washing/drying areas and changing rooms may be constructed. Regardless of the type and location, for the purpose of this indicator, a constructed “MHM facility” must</p> <ol style="list-style-type: none"> <li>1. Be designed with user input;</li> <li>2. Be contextually appropriate;</li> <li>3. Be safely and conveniently accessible;</li> <li>4. Be gender segregated;</li> <li>5. Afford privacy to the user;</li> <li>6. Be lockable from the inside (where appropriate);</li> <li>7. Ensure users have access to water and soap (ideally inside);</li> <li>8. Be well-lit or ensure users have access to torches;</li> <li>9. Incorporate appropriate waste management (from generation to final disposal) that enables discreet disposal of menstrual materials; and</li> <li>10. Be sufficiently clean such that usage is not deterred. This includes no feces on latrine slabs, no solid waste outside of bins, and the absence of noxious odors and excess flies.</li> </ol> <p>Whether an MHM facility is “in use” will be based on reported usage by women and</p>	

girls. This should be measured through Focus Group Discussions (FGDs) or individual interviews as other quantitative methods may be inappropriate. If women and girls are reporting consistent usage of a specific MHM facility for its intended use, then the facility is categorized as “in use.” If, on the other hand, women and girls are reporting no usage, regardless of the reason, that MHM facility would not be considered “in use.” In this case, the FGD should explore reasons why the MHM facility is not in use and use the participants’ feedback to make necessary improvements. If participants are reporting inconsistent or low usage of a facility, that may still qualify it as “in use” if the reason is simply that the facility is in high demand (indicating a need to increase the number of MHM facilities). If, however, the reason for low or inconsistent usage is due to poor user acceptance of the facility, it would not count as “in use.” In either case, the FGD should explore the reasons for low usage and make necessary program improvements.

**Numerator:** Number of MHM facilities in use.

**Denominator:** Total number of MHM facilities constructed.

**Unit of Measure:** Number of MHM facilities for numerator and denominator. Numerator, denominator, and percentage are reported.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** The denominator is collected from project records then verified by direct observation using the definition above. All communal MHM facilities which project records list as being constructed should be verified by direct observation.

The numerator will be assessed by FGDs or individual interviews with women and girls. Questions should include

1. During your period, where do you change your cloth/pad?;
2. Where do you wash and dry cloths/reusable pads?;
3. If not using MHM facilities for changing, washing or drying cloths/pads, are the areas you choose to do so acceptable – why or why not?;
4. Are the constructed MHM facilities acceptable – why or why not?;
5. What changes to existing MHM facilities are required to make them more acceptable?

**Suggested Data Source:** For the numerator, records from FGDs/interviews with women and girls. For the denominator, project records and records from direct observation of MHM facilities.

## Water Supply

WASH	
<b>SECTOR</b>	WASH

<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> Number of people directly utilizing improved water services provided with OFDA funding	
<b>INDICATOR DESCRIPTION</b>	
<b>Definition(s):</b> People: Individuals counted as utilizing improved water services are those who, as a direct result of program activities, have improved water quality and/or increased water quantity available for drinking, personal hygiene, cooking, or other household uses.	
<b>Numerator:</b> N/A	
<b>Denominator:</b> N/A	
<b>Unit of Measure:</b> Number of individuals	
<b>Disaggregated by:</b> Sex	
<b>Suggested Data Collection Method:</b> Household (HH) survey, including a determination of the quantity of water utilized per day within the home and water quality monitoring data as a determination of water quality within the home. HH survey is the best means to determine if beneficiaries are utilizing safe water in sufficient volumes within the home. If a household survey and household level water quality testing are not possible, please explain why not, and explain what other means were utilized to determine if households were utilizing more water and/or better quality water inside the home.	
<b>Suggested Data Source:</b> Primary data collection should be utilized to determine if beneficiaries use sufficient quantities of water inside the home and/or use improved water quality inside the home for drinking, cooking, personal hygiene, and other household uses.	

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS1 (Water Usage):</b> Average liters/person/day collected from all sources for drinking, cooking, and hygiene	
<b>INDICATOR DESCRIPTION</b>	

**Definition(s):** This indicator measures the average daily per capita usage in liters/person/day (l/p/d) of all water collected (safe as well as unsafe) for the purpose of drinking, cooking, and hygiene.

“All sources” means any source, regardless of the quality of water, from which water is collected for the purpose of satisfying the drinking, cooking, and hygiene needs of household members. This excludes water collected and used for

- Livestock
- Agriculture
- Gardening
- Construction
- Other livelihood generating purposes.

This indicator must be measured at household level. A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators and to ensure that the indicator is accurately measuring per capita water consumption of all water consumers at the household.

**Numerator:** Sum of all per-capita water usage estimates (l/p/d) for drinking, cooking, and hygiene among surveyed households

**Denominator:** Total number of households surveyed in the target population

**Unit of Measure:** For the numerator, liters/person/day (summed for all households interviewed). For the denominator, number of households interviewed. For the average, l/p/d. Numerator, denominator, and the average are reported.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** Average l/p/d will be estimated by a quantitative, representative, population-based (household) survey.

For each household surveyed, estimate the total volume of water used per day for all household members. This requires identifying and estimating the volume of each water container used, determining the number of times each container is filled per day, calculating the total volume collected per day (e.g., volume of container #1 multiplied by # times filled + volume of container #2 multiplied by # times filled + etc.), and dividing the total daily volume by the number of consumers (i.e. the household members). This information should be collected from a household member who is typically involved in collecting water. This process works whether households collect water directly from a water point or have water trucked into large, household storage tanks.

Notes

- It may be necessary to account for water that is used at the source (e.g., washing clothes at a river).
- Train enumerators to exclude water used for purposes other than drinking, cooking, and hygiene (e.g., water used for a kitchen garden)
- Train enumerators to account for cases where households do not collect water

daily (e.g., every other day) to ensure that the ultimate per capita water usage estimate is in liters/person/**day**.

- Estimating this indicator will be difficult in areas where households are connected to piped water supplies and do not have metered connections.

**Suggested Data Source:** Records from statistically valid household surveys preferred. Other reliable population-based survey methods (e.g., people at water points) may be used when household surveys are not possible.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator: WS2 (Water Production):</b> Estimated safe water supplied per beneficiary in liters/person/day	
INDICATOR DESCRIPTION	
<p><b>Definition(s):</b> This indicator provides a crude estimate of safe water availability based on the estimated population size and the estimated production of safe water. This is useful as a guide in the early stages of an emergency. Otherwise, WS1 (Water Usage) is preferred as it more directly measures the quantity of water people are using.</p> <p>“Safe water” is defined as, at a minimum, meeting the following two requirements at the point of distribution:</p> <ul style="list-style-type: none"> <li>• 0 fecal coliforms per 100 ml sample; and</li> <li>• &gt; 0.2 mg/L free residual chlorine (FRC) and &lt; 5 nephelometric turbidity units (NTU) for piped supplies, trucked supplies, and any water provided when there is a risk of a diarrheal epidemic.</li> </ul> <p>Partners may make this definition more stringent as necessary to account for other known parameters which may pose significant, acute risks to water safety in their context (e.g., establishing maximum levels for toxins such as arsenic known to be prevalent in local groundwater supplies). If making the “safe water” definition more stringent, partners will clearly state the augmented definition in their proposal.</p> <p>“Supplied” means that the water is provided from an improved source available to the public. An “improved source” is one which has the potential to deliver safe water by nature of its design and construction. Specifically, for this indicator, an improved source is limited to: piped water; boreholes or tubewells; protected dug wells; protected springs; protected rainwater collection systems; packaged or delivered water; and emergency water treatment systems.</p>	
<b>Numerator:</b> Estimated volume of safe water provided per day (liters/day) for the target population	
<b>Denominator:</b> Estimated or enumerated size of the target population	

**Unit of Measure:** Liters/day for numerator. Number of people for denominator. Both numerator and denominator are reported as well as the ratio (l/p/d) of safe water supplied per beneficiary per day.

**Disaggregated by:** N/A

**Suggested Data Collection Method:** The numerator will be estimated by summing the estimated daily yields of each improved water source that complies with the definition of “safe water.” On-site yield estimates and confirmation of safe water compliance are preferred. Yield estimates should take into account losses which may occur during delivery or distribution (e.g., losses in a piped network). Where on-site estimates of all sources are not practical, explain how the safe water daily yield was estimated. Please refer to the PIRS for USAID/OFDA indicators WS7 and WS8 for guidance on assessing fecal coliforms and free residual chlorine.

For the denominator, while a census is the most accurate method, it is unlikely to be practical in the early stages of the response. A representative, population-based survey is the preferred alternative. For example, a representative household (HH) survey could reasonably estimate the average HH size. The population could then be estimated by multiplying the average HH size by the estimated number of HHs. If using systematic random sampling, one benefit is that the survey will yield the estimated total number of HHs. Alternately, if the area is too large to conduct a full HH survey but has a fairly homogenous population density, an estimate can be conducted from defined segments of the area and then extrapolated. Please refer to the PIRS for USAID/OFDA indicator S3 for an explanation of this method.

The numerator and denominator can also be estimated either from secondary data or through key informant interviews (KIIs). The accuracy of data from either of these sources may be poor unless the data is based on a recent census or population-based assessment by a third party.

**Suggested Data Source:** For the numerator, records of estimated yields from each improved source providing safe water. For the denominator, either: a census; a statistically valid population-based survey; secondary data; or KIIs. Partners must describe what sources or methods were used to estimate both the numerator and the denominator and the rationale for selecting the source or method.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS3 (Use of Improved Water Sources):</b> Percent of households targeted by WASH program that are collecting all water for drinking, cooking, and hygiene from improved water sources	
<b>INDICATOR DESCRIPTION</b>	

**Definition(s):**

This indicator measures the proportion of the population that is collecting water for drinking, cooking, and hygiene solely from improved water sources.

A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators.

This indicator focuses only on water collected for the drinking, cooking, and hygiene needs of household members. This excludes water collected for livestock, agriculture, gardening, construction, or other livelihood generating purposes

An “improved source” is one which has the potential to deliver safe water by nature of its design and construction. Specifically, for this indicator, an improved source is limited to: piped water; boreholes or tubewells; protected dug wells; protected springs; protected rainwater collection systems; packaged or delivered water; and emergency water treatment systems.

**Numerator:**

Number of households collecting all water for drinking, cooking and hygiene from improved sources

**Denominator:**

Total number of households surveyed in the target population

**Unit of Measure:**

Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A**Suggested Data Collection Method:**

The practice of collecting all water for drinking, cooking and hygiene from improved sources is measured through interviews during a quantitative, representative, population-based (household) survey.

Questions must be open ended, e.g.: “From which source(s) do you collect water for drinking, cooking, and hygiene?”, “Are there times when water is unavailable from these sources?”; “If yes, where do you collect water for drinking, cooking, and hygiene when it is unavailable from these sources?”; “Do you collect water for drinking, cooking, and hygiene from any other sources other than those mentioned?”

**Suggested Data Source:**

Records from interviews conducted during statistically valid household surveys are preferred. Other reliable population-based survey methods (e.g., people at water points) may be used when household surveys are not possible.





<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator: WS4 (Household Water Quality - Bacteriological):</b> Percent of households whose drinking water supplies have 0 fecal coliforms per 100 ml sample	
<b>INDICATOR DESCRIPTION</b>	
<p><b>Definition(s):</b> This indicator measures the microbiological water quality at household level. A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators.</p> <p>“Drinking water supplies” at household level may be stored water or, where households have a piped connection directly into the structure or compound, a faucet (i.e., a tap). For households that do not have a faucet, water stored for the purpose of drinking should be microbiologically tested. For households that do have a faucet, water directly from the faucet as well as any water stored for the purpose of drinking should be tested.</p> <p>For this indicator, “fecal coliforms” refers specifically to thermotolerant coliforms (see note beneath). As thermotolerant coliforms are typically enumerated as colony forming units (CFUs) or Most Probable Number (MPN), for this indicator, 0 fecal coliforms = 0 CFU = 0 MPN.</p> <p>Note: The term “fecal coliform” has routinely been used in water microbiology to denote coliform organisms which grow at 44.0°C - 44.5°C and ferment lactose to produce acid and gas. That said, some organisms with these same characteristics may not be of fecal origin and the term “thermotolerant coliforms” is, therefore, more correct. Nonetheless, the presence of thermotolerant coliforms nearly always indicates fecal contamination. Usually, more than 95 per cent of thermotolerant coliforms isolated from water are <i>Escherichia coli</i> (<i>E. Coli</i>), the presence of which is definitive proof of fecal contamination. As a result, thermotolerant coliforms are deemed a sufficient indicator of the microbiological quality of water, and it is generally unnecessary to further isolate <i>E. Coli</i> or other fecal coliforms.</p>	
<b>Numerator:</b> Number of households whose drinking water supplies have 0 fecal coliforms per 100 ml sample	
<b>Denominator:</b> Total number of households surveyed in the target population	
<b>Unit of Measure:</b> Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.	
<b>Disaggregated by:</b> N/A	
<b>Suggested Data Collection Method:</b> This indicator will be measured via household-level water quality testing during a quantitative, representative, household survey. You	

are not required to use commercial or government labs for water quality analyses. The use of appropriate field-based testing kits is acceptable and encouraged. If partners wish to test specifically for *E. Coli* instead of the broader category of thermotolerant coliforms, that is acceptable as long as the bacteria are cultured at 44°C (in this case, report *E. Coli* as a one-to-one equivalent of fecal coliforms).

Enumerators and program staff/technicians must be trained and proficient in collecting, transporting, and processing water samples. As well, in order to ensure the maximum number of households agree to have their water tested, partners should develop an outreach plan in advance that addresses local cultural sensitivities and any potential concerns households may have related to having their water tested.

Household water samples will be analyzed for thermotolerant coliforms using either the membrane filtration method or the multiple fermentation tube/compartment method. Any alternative analysis methods proposed by partners should be clearly stated in the Water Supply section of partner proposals.

**Suggested Data Source:**

Records of microbiological water quality results from water samples collected during statistically valid household surveys. Partners will indicate the water quality analysis method used when reporting.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS5 (Household Water Quality - Chlorine):</b> Percent of households whose drinking water supplies have a free residual chlorine (FRC) > 0.2 mg/L	
INDICATOR DESCRIPTION	
<b>Definition(s):</b> This indicator measures the effectiveness of efforts to disinfect public water supplies and maintain adequate levels of free residual chlorine (FRC) all the way down to the point of consumption at the household.  A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators.  “Drinking water supplies” at household level may be stored water or, where households have a piped connection directly into the structure or compound, a faucet (i.e. a tap). For households that do not have a faucet, water stored for the purpose of drinking should be tested for FRC. For households that do have a faucet, water directly from the faucet as well as any water stored for the purpose of drinking should be tested.	

FRC is the amount of residual chlorine in water in the form of hypochlorous acid, hypochlorite ions, and dissolved chlorine gas. It is the chlorine that remains available as a disinfectant after the chlorine demand has been met (i.e. consumed by oxidation and reactions with organic and inorganic materials) and other residual chlorine has combined with ammonia and other nitrogen compounds (significantly reducing its effectiveness as a disinfectant). The presence of FRC indicates that: (1) A sufficient amount of chlorine was added to the water to inactivate most of the pathogens that cause diarrheal disease; and (2) Some extended protection is provided (relative to the quantity of FRC) to prevent recontamination during transport home and storage of water in the household.

**Numerator:**

Number of households whose drinking water supplies have FRC > 0.2 mg/L

**Denominator:**

Total number of households surveyed in the target population

**Unit of Measure:**

Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:**

This indicator will be measured via household-level water quality testing during a quantitative, representative, household survey.

Enumerators and program staff/technicians must be trained and proficient in collecting and analyzing samples for FRC. As well, in order to ensure the maximum number of households agree to have their water tested, partners should develop an outreach plan in advance that addresses local cultural sensitivities and any potential concerns households may have related to having their water tested.

Household water samples will be analyzed for FRC using the DPD-colorimetric method.

**Suggested Data Source:**

Records of FRC testing results from water samples collected during statistically valid household surveys.

**SECTOR**

WASH

**SUB-SECTOR**

Water Supply

**Indicator:**

**WS6 (Household Water Quality – Point of Use Chlorine):** Percent of households receiving point-of-use products whose water supplies have free residual chlorine (FRC)

present
<b>INDICATOR DESCRIPTION</b>
<p><b>Definition(s):</b>  This indicator measures how effective chlorine-based point-of-use (POU) products are being used at the household level. POU is also known as household water treatment (HHWT).</p> <p>A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators.</p> <p>For the purpose of this indicator, POU products are limited to chlorine-based products (e.g., NaDCC tablets, sodium hypochlorite, combined flocculant/disinfectant sachets).</p> <p>For this indicator, “water supplies” refers to water stored at the household intended for drinking, cooking, or hygiene.</p> <p>FRC is the amount of residual chlorine in water in the form of hypochlorous acid, hypochlorite ions, and dissolved chlorine gas. It is the chlorine that remains available as a disinfectant after the chlorine demand has been met (i.e. consumed by oxidation and reactions with organic and inorganic materials) and other residual chlorine has combined with ammonia and other nitrogen compounds (significantly reducing its effectiveness as a disinfectant). The presence of FRC indicates that: (1) A sufficient amount of chlorine was added to the water to inactivate most of the pathogens that cause diarrheal disease; and (2) Some extended protection is provided (relative to the quantity of FRC) to prevent recontamination during transport home and storage of water in the household.</p> <p>For this indicator, the FRC must be greater than 0. (FRC &gt; 0 mg/L)</p>
<p><b>Numerator:</b>  Number of households whose water supplies have free residual chlorine present</p>
<p><b>Denominator:</b>  Total number of households receiving chlorine based POU products which were surveyed</p>
<p><b>Unit of Measure:</b>  Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.</p>
<p><b>Disaggregated by:</b> N/A</p>
<p><b>Suggested Data Collection Method:</b>  This indicator will be measured via household-level water quality testing during a quantitative, representative, household survey. The sample frame is only those households that received chlorine based POU products.</p>

Enumerators and program staff/technicians must be trained and proficient in collecting and analyzing samples for FRC. As well, in order to ensure the maximum number of households agree to have their water tested, partners should develop an outreach plan in advance that addresses local cultural sensitivities and any potential concerns households may have related to having their water tested.

Household water samples will be analyzed for FRC using the DPD-colorimetric method.

**Suggested Data Source:**

Records of FRC testing results from water samples collected during statistically valid household surveys.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS7 (Source Water Quality - Bacteriological):</b> Percent of water points developed, repaired, or rehabilitated with 0 fecal coliforms per 100 ml sample	
INDICATOR DESCRIPTION	
<b>Definition(s):</b> This indicator measures the microbiological water quality directly at the water point (i.e. the point of distribution).  For this indicator, a “water point” is defined as a specific location which is available to the public for collecting water for drinking, cooking, and hygiene (regardless of the source of water and regardless of the method of extraction). This may include public tapstands, boreholes/tubewells, dug wells, and protected springs.  For this indicator, “fecal coliforms” refers specifically to thermotolerant coliforms (see note beneath). As thermotolerant coliforms are typically enumerated as colony forming units (CFUs) or Most Probable Number (MPN), for this indicator, 0 fecal coliforms = 0 CFU = 0 MPN.  Note: The term “fecal coliform” has routinely been used in water microbiology to denote coliform organisms which grow at 44.0°C - 44.5°C and ferment lactose to produce acid and gas. That said, some organisms with these same characteristics may not be of fecal origin and the term “thermotolerant coliforms” is, therefore, more correct. Nonetheless, the presence of thermotolerant coliforms nearly always indicates fecal contamination. Usually, more than 95 per cent of thermotolerant coliforms isolated from water are <i>Escherichia coli</i> ( <i>E. Coli</i> ), the presence of which is definitive proof of fecal contamination. As a result, thermotolerant coliforms are deemed a sufficient indicator of the microbiological quality of water, and it is generally unnecessary to further isolate <i>E.</i>	

<i>Coli</i> or other fecal coliforms.
<b>Numerator:</b> Number of water points developed, repaired, or rehabilitated with 0 fecal coliforms per 100 ml sample
<b>Denominator:</b> Total number of water points developed, repaired, or rehabilitated
<b>Unit of Measure:</b> Number of water points for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.
<b>Disaggregated by:</b> N/A
<b>Suggested Data Collection Method:</b> This indicator will be measured by a census of all water points developed, repaired, or rehabilitated by the program.  Program staff and technicians must be trained and proficient in collecting, transporting, and processing water samples. Samples will be analyzed for thermotolerant coliforms using either the membrane filtration method or the multiple fermentation tube/compartment method. Any alternative analysis methods proposed by partners should be clearly stated in the Water Supply section of partner proposals.
<b>Suggested Data Source:</b> Records of microbiological water quality results from water samples collected during a census of all water points developed, repaired, or rehabilitated by the program. Partners will indicate the water quality analysis method used when reporting.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS8 (Source Water Quality - Chlorine):</b> Percent of water points developed, repaired, or rehabilitated with a free residual chlorine (FRC) > 0.2 mg/L	
<b>INDICATOR DESCRIPTION</b>	
<b>Definition(s):</b> This indicator measures free residual chlorine directly at the water point (i.e., the point of distribution).  For this indicator, a “water point” is defined as a specific location which is available to the public for collecting water for drinking, cooking, and hygiene (regardless of the	

source of water and regardless of the method of extraction). This may include public tapstands, boreholes/tubewells, dug wells, and protected springs.

FRC is the amount of residual chlorine in water in the form of hypochlorous acid, hypochlorite ions, and dissolved chlorine gas. It is the chlorine that remains available as a disinfectant after the chlorine demand has been met (i.e. consumed by oxidation and reactions with organic and inorganic materials) and other residual chlorine has combined with ammonia and other nitrogen compounds (significantly reducing its effectiveness as a disinfectant). The presence of FRC indicates that: (1) A sufficient amount of chlorine was added to the water to inactivate most of the pathogens that cause diarrheal disease; and (2) Some extended protection is provided (relative to the quantity of FRC) to prevent recontamination during transport home and storage of water in the household.

**Numerator:**

Number of water points developed, repaired, or rehabilitated with FRC > 0.2 mg/L

**Denominator:**

Total number of water points developed, repaired, or rehabilitated

**Unit of Measure:**

Number of water points for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:**

This indicator will be measured by a census of all water points developed, repaired, or rehabilitated by the program.

Program staff and technicians must be trained and proficient in collecting and analyzing samples for FRC.

Samples will be analyzed for FRC using the DPD-colorimetric method.

**Suggested Data Source:**

Records of FRC testing results from water samples collected during a census of all water points developed, repaired, or rehabilitated by the program.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS9 (Water Point Management):</b> Percent of water user committees created and/or trained by the WASH program that are active at least three (3) months after training	
<b>INDICATOR DESCRIPTION</b>	

**Definition(s):**

This indicator provides a measure of the program's effectiveness in establishing functional water user committees.

A "water user committee" is a designated group of community members who are representative of the community and are responsible for coordinating all aspects of the operation and maintenance of a specific community water supply system.

"Created and/or trained" refers to newly created committees which are formed and trained (i.e. for new water systems or for existing systems that lack a committee) as well as existing committees which require training or retraining.

For the purpose of this indicator, an "active" committee is defined as: (1) Having a designated group of individuals who are representative of the community and have been trained to perform as a water user committee; (2) Having a written set of bylaws that guide the conduct of the committee (e.g., member roles and responsibilities, meeting frequency, policies guiding the operation of the water supply system, fee collection policies, policies for preventive maintenance and repairs); and (3) Being in compliance with its bylaws.

**Numerator:**

Number of water user committees created and/or trained by the WASH program that are active at least three (3) months after training

**Denominator:**

Total number of water user committees created and/or trained by the WASH program

**Unit of Measure:**

Number of water user committees for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:**

This indicator will be assessed no earlier than three (3) months after the committees have been trained.

The numerator will be assessed by conducting focus group discussions (FGDs) with each water user committee created and/or trained by the program. In addition, a separate FGD should be conducted with a random group of community water users which the committee represents. Questions during the FGDs will be aimed at assessing whether the committee meets the definition of "active" described above.

The denominator will be collected from project records.

**Suggested Data Source:**

For the numerator, records from FGDs with water user committees and records from FGDs with groups of community water users. For the denominator, project records.



<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS10 (Water Point Cleanliness):</b> Percent of water points developed, repaired, or rehabilitated that are clean and protected from contamination	
<b>INDICATOR DESCRIPTION</b>	
<b>Definition(s):</b> <p>This indicator provides a measure of the sanitary conditions of water points developed, repaired, or rehabilitated by the program.</p> <p>For this indicator, a “water point” is defined as a specific location which is available to the public for collecting water for drinking, cooking, and hygiene (regardless of the source of water and regardless of the method of extraction). This may include public tapstands, boreholes/tubewells, dug wells, and protected springs.</p> <p>To be considered “clean”, the area within a five (5) meter radius around the water point must be absent of: (1) Human feces; (2) Animal feces; (3) Solid waste; and (4) Any other substances that may compromise the sanitary condition of the water point (e.g., petroleum products).</p> <p>For water points that are co-located with a source (e.g., dug wells with a windlass, boreholes with a handpump), “protected” means that:</p> <ol style="list-style-type: none"> <li>1. The wellhead is raised and covered;</li> <li>2. There is a concrete apron that extends at least one meter beyond the edge of the source;</li> <li>3. The apron drains into a separate soak pit that prevents contamination of the source;</li> <li>4. There is no standing water; and</li> <li>5. Where necessary, effective fencing is provided to prevent livestock from coming in contact with the water point and contaminating the water source.</li> </ol> <p>For water points not co-located with a source (e.g., a public standpipe from a piped network, tapstands connected to a bladder), “protected” means that:</p> <ol style="list-style-type: none"> <li>1. The water collection area is designed to minimize standing water (e.g., a concrete or gravel base);</li> <li>2. The collection area drains to a soak pit;</li> <li>3. There is no standing water; and</li> <li>4. Where necessary to prevent livestock access, fencing is provided.</li> </ol>	
<b>Numerator:</b> Number of water points developed, repaired, or rehabilitated that are clean and protected from contamination	
<b>Denominator:</b>	

Total number of water points developed, repaired, or rehabilitated
<b>Unit of Measure:</b> Number of water points for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.
<b>Disaggregated by:</b> N/A
<b>Suggested Data Collection Method:</b> This indicator will be assessed no earlier than three (3) months after the water point has been developed, repaired, or rehabilitated.  For the numerator, the sanitary condition of every (100%) water point developed, repaired, or rehabilitated by the program will be assessed by direct observation during a water point survey.  The denominator will be collected from project records.
<b>Suggested Data Source:</b> For the numerator, records from observational data collected during water point surveys. For the denominator, project records.

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	Water Supply
<b>Indicator:</b> <b>WS11 (Water Safety Plan):</b> Percent of water committees actively using Water Safety Plans that have been created for water points developed, repaired, or rehabilitated by the water supply program	
<b>INDICATOR DESCRIPTION</b>	
<b>Definition(s):</b> This indicator provides a measure of the program's effectiveness in establishing functional Water Safety Plans.  A "water user committee" is a designated group of community members who are representative of the community and are responsible for coordinating all aspects of the operation and maintenance of a specific community water supply system.  A "water point" is defined as a specific location which is available to the public for collecting water for drinking, cooking, and hygiene (regardless of the source of water and regardless of the method of extraction). This may include public tapstands, boreholes/tubewells, dug wells, and protected springs. That said, this specific indicator is meant to capture the use of a Water Safety Plan that covers the entire water supply system (from source /catchment to consumer). So, even if partners' technical work is	

focused only on a portion of a water supply system (e.g., extending a piped network, repairing a public tap, rehabilitating a cracked apron), they can also use this indicator if promoting a Water Safety Plan as a method for the community to holistically manage the safety of their entire water supply system.

Please refer to the following reference for Water Safety Plans, “*Water Safety Plan – Managing drinking-water quality from catchment to consumer*,” WHO, 2005.  
[http://www.who.int/water\\_sanitation\\_health/dwq/wsp170805.pdf](http://www.who.int/water_sanitation_health/dwq/wsp170805.pdf)

The criteria for determining whether the committee is “actively using” the Water Safety Plan are outlined in section 14.11 (Audit) of the WHO reference above. “*A Practical Guide to Auditing Water Safety Plans*,” WHO & IWA, 2015” provides more comprehensive guidance on conducting audits of WSPs. When creating the WSP, partners will simultaneously develop an auditing plan that is simple and tailored to the community’s water supply system.

**Numerator:**

Number of water committees actively using Water Safety Plans that have been created for water points developed, repaired, or rehabilitated by the water supply program

**Denominator:**

Total number of water committees for which Water Safety Plans have been created for water points developed, repaired or rehabilitated by the water supply program

**Unit of Measure:**

Number of water user committees for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:**

This indicator will be assessed no earlier than three (3) months after establishment of Water Safety Plans.

For the numerator, an audit of each committee’s WSP will be conducted to assess whether the committee is following the actions outlined in the Water Safety Plan.

The denominator will be collected from project records.

**Suggested Data Source:**

For the numerator, records from audits of existing WSPs. For the denominator, project records.

**WASH NFIs**

**SECTOR**

WASH

<b>SUB-SECTOR</b>	WASH NFIs
<b>Indicator:</b> Total number of people receiving WASH NFI assistance through all modalities (without double-counting)	
<b>INDICATOR DESCRIPTION</b>	
<b>Definition(s):</b> People: Total number of individuals receiving WASH NFI assistance through the program activities.  NFIs: direct distribution of hygiene items, hygiene kits, cash or vouchers.  Modality: direct distribution, voucher, or cash.	
<b>Numerator:</b> N/A	
<b>Denominator:</b> N/A	
<b>Unit of Measure:</b> Number of individuals	
<b>Disaggregated by:</b> Sex	
<b>Suggested Data Collection Method:</b> The number of individuals may be estimated in a variety of ways depending upon the context and the means of increasing access to NFIs. If direct distributions take place, records of the number of families or individuals receiving NFIs should be available. An average household size may need to be estimated, which can be done using either primary or secondary data. If cash or vouchers are distributed to households or individuals, records of cash/voucher distributions will be necessary, as well as an estimate of household size, determined through primary or secondary data. Be sure to describe what data sources were used to determine an average household size if used to estimate the number of individual beneficiaries.	
<b>Suggested Data Source:</b> <u>Records of distributions or transfers that took place</u>	

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	WASH NFIs
<b>Indicator:</b> <b>WN1 (Satisfaction with contents of WASH NFI kit/vouchers):</b> Percent of households reporting satisfaction with the contents of the WASH NFIs received through direct distribution (i.e., kits) or vouchers	
<b>INDICATOR DESCRIPTION</b>	

**Definition(s):**

This indicator assesses beneficiary households' satisfaction with the **contents** of WASH NFIs (non-food items) received.

The primary purpose of WASH NFIs is to enable water, sanitation, or hygiene related behaviors. Examples of WASH NFIs include: water transport/storage containers, soap, materials for anal cleansing, miscellaneous hygiene items (shampoo, razors, toothpaste, toothbrushes, nail clippers, etc.), menstrual hygiene management materials, diapers, cleaning materials and products.

A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators.

A household's "satisfaction" with the contents will be assessed by interviewing a household member who has direct knowledge of the household's need for hygiene items and who is aware of the hygiene items received via kits or purchased via a voucher. The *contents* refers to the variety of WASH NFIs (examples of which are provided above) necessary to fulfill the household's hygiene needs. To be satisfied with the contents implies that the household was able to obtain the items it deemed necessary to enable safe hygiene behaviors.

**Numerator:** Number of households reporting satisfaction with the contents of the WASH NFIs received through direct distribution (i.e. kits) or vouchers.

**Denominator:** Total number of households surveyed in the target population

**Unit of Measure:** Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:**

This indicator is measured through a post-distribution monitoring (PDM) survey. The survey can be quantitative (e.g. a household survey that is probability based and representative) or qualitative (e.g. focus group discussions). In either case, the sampling frame is limited to those households receiving WASH NFIs either through direct distribution or vouchers.

Questions to assess satisfaction may include

1. Were you satisfied with the variety of hygiene items your household received in the kit (or was able to purchase with the voucher)?
2. Why or why not?
3. What additional items would you have liked to receive in the kit (or have included in the voucher)?; and
4. Were there any items which you did not use? If so, why not?

Please refer to the WASH NFI section in the Proposal Guidelines for a full list of sample questions recommended for PDM surveys.

**Suggested Data Source:** Records from PDM surveys. When reporting, please state the type of survey conducted (e.g., household survey or focus group discussions).

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	WASH NFIs
<b>Indicator:</b> <b>WN2 (Satisfaction with quantity of WASH NFIs):</b> Percent of households reporting satisfaction with the quantity of WASH NFIs received through direct distribution (i.e., kits), vouchers, or cash	
<b>INDICATOR DESCRIPTION</b>	
<b>Definition(s):</b> This indicator assesses beneficiary households' satisfaction with the <b>quantity</b> of WASH NFIs received.  The primary purpose of WASH NFIs is to enable water, sanitation, or hygiene related behaviors. Examples of WASH NFIs include (but are not limited to): water transport/storage containers, soap, materials for anal cleansing, miscellaneous hygiene items (shampoo, razors, toothpaste, toothbrushes, nail clippers, etc.), menstrual hygiene management materials, diapers, cleaning materials and products.  A household is generally defined as one or more people living in shared space (a physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators.  A household's "satisfaction" with the quantity of WASH NFIs received will be assessed by interviewing a household member who has direct knowledge of the household's need for hygiene items and who is aware of the hygiene items received via kits or purchased via a voucher/cash. The "quantity" refers simply to the number of each WASH NFI (examples of which are provided above) necessary to fulfill the household's hygiene needs. For instance, if a family received only one water storage container and felt they needed three, they would not be satisfied. If a household with 11 members received a hygiene kit designed for 6 family members, they also may not be satisfied.	
<b>Numerator:</b> Number of households reporting satisfaction with the quantity of WASH NFIs received through direct distribution (i.e. kits), vouchers, or cash	
<b>Denominator:</b> Total number of households surveyed in the target population	

<b>Unit of Measure:</b> Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.
<b>Disaggregated by:</b> N/A
<b>Suggested Data Collection Method:</b> This indicator is measured through a post-distribution monitoring (PDM) survey. The survey can be quantitative (e.g. a household survey that is probability based and representative) or qualitative (e.g. Focus Group Discussions). In either case, the sampling frame is limited to those households receiving WASH NFIs either thru direct distribution or vouchers, or cash.  Questions to assess satisfaction with the quantity of WASH NFIs may include <ol style="list-style-type: none"> <li>1. Were there any issues with the quantity of items provided (or purchased with the voucher/cash?; and</li> <li>2. If yes, which items and why.</li> </ol> Refer to the WASH NFI section in the Proposal Guidelines for a full list of sample questions recommended for PDM surveys.
<b>Suggested Data Source:</b> Records from PDM surveys. When reporting, please state the type of survey conducted (e.g., household survey or focus group discussions).

<b>SECTOR</b>	WASH
<b>SUB-SECTOR</b>	WASH NFIs
<b>Indicator:</b> <b>WN3 (Satisfaction with quality of WASH NFIs):</b> Percent of households reporting satisfaction with the quality of WASH NFIs received through direct distribution (i.e., kits), vouchers, or cash	
<b>INDICATOR DESCRIPTION</b>	
<b>Definition(s):</b> This indicator assesses beneficiary households' satisfaction with the <b>quality</b> of WASH NFIs received.  The primary purpose of WASH NFIs is to enable water, sanitation, or hygiene related behaviors. Examples of WASH NFIs include (but are not limited to): water transport/storage containers, soap, materials for anal cleansing, miscellaneous hygiene items (shampoo, razors, toothpaste, toothbrushes, nail clippers, etc.), menstrual hygiene management materials, diapers, cleaning materials and products.  A household is generally defined as one or more people living in shared space (a	

physical structure or compound) and sharing critical resources such as water, hygiene/sanitation facilities, or food preparation areas. Partners should adapt this household definition to their context to ensure consistency among enumerators.

A household's "satisfaction" with the quality of WASH NFIs received will be assessed by interviewing a household member who has direct knowledge of the household's need for hygiene items and who is aware of the hygiene items received via kits or purchased via a voucher/cash. The "quality" refers to a subjective assessment by the household of the suitability, functionality, and durability of each WASH NFI received or purchased.

**Numerator:**

Number of households reporting satisfaction with the quality of WASH NFIs received through direct distribution (i.e. kits), vouchers, or cash

**Denominator:**

Total number of households surveyed in the target population

**Unit of Measure:**

Number of households for both numerator and denominator. Both numerator and denominator are reported as well as the percentage.

**Disaggregated by:** N/A

**Suggested Data Collection Method:**

This indicator is measured through a post-distribution monitoring (PDM) survey. The survey can be quantitative (e.g. a household survey that is probability based and representative) or qualitative (e.g. focus group discussions). In either case, the sampling frame is limited to those households receiving WASH NFIs either thru direct distribution or vouchers, or cash.

Questions to assess satisfaction with the quality of WASH NFIs may include

1. Were there any issues with the quality of items provided (or purchased with the voucher/cash?; and
2. If yes, which items and why?

Please refer to the WASH NFI section in the Proposal Guidelines for a full list of sample questions recommended for PDM surveys.

**Suggested Data Source:** Records from PDM surveys. When reporting, please state the type of survey conducted (e.g., household survey or focus group discussions).